

**DEPARTMENT OF BUSINESS AFFAIRS AND CONSUMER PROTECTION
ALTERNATIVE PRICING SYSTEM APPLICATION**



Applications are accepted via e-mail to baep.aps@cityofchicago.org or mail to: 2350 W. Ogden Ave, Chicago IL 60608

Agency / Business Information

Iris Account #: _____ Legal Business Name: _____

D/B/A: _____

Coordinator: _____

Mailing Address: _____

In the areas provided below please document any new or additional store site/s information.

Site #: _____ Store Name: _____

Contact Name: _____ Title: _____

Business Address: _____

City & State: Chicago, IL Zip Code: _____

Telephone No: _____ Fax No: _____

Device Brand: _____ # of Registers: _____

Site #: _____ Store Name: _____

Contact Name: _____ Title: _____

Business Address: _____

City & State: Chicago, IL Zip Code: _____

Telephone No: _____ Fax No: _____

Device Brand: _____ # of Registers: _____

Site #: _____ Store Name: _____

Contact Name: _____ Title: _____

Business Address: _____

City & State: Chicago, IL Zip Code: _____

Telephone No: _____ Fax No: _____

Device Brand: _____ # of Registers: _____

Disclaimer and Signature

The undersigned hereby certifies that the information stated on this form is true and accurate.

Print Name: _____ Title: _____

Signature: _____ Date: _____